SUMMARY FORM

COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

Section I: Agreement Deta	ails						
Public Employer:		County: Middlesex					
Employee Organization	Public Works Loc	al #210	Emptoyees in Unit: 3				
Base Year Contract Term:	1/1/2012 12/31/2013 New Contract 1			aci Term 1/1/2014			
Type of Settlement	Mediated Settle	ement 🔲 i	act-Finder Recommendation		Voluntary Settlement Super Conciliation		
			Base Year -	imn A Total Costs	Column B New Base Year - To (Fkst Year of Successor	otal Costs	
Section II: Economic							
Item 1 . Sal	ary		\$170,426		\$182,725		
Item 2 Incr	ement		\$13,000		\$15,000		
ttem 3 Lon	gevity	_	\$5,700		\$6,400		
Item 4						N	
Item 5							
Rem 6							
Item 7		-					
Item 8		_					
llem 9							
llem 10							
Item 17	***	_					
item 12							
Any additional items list on separate shi	ieł	Additional Items					
antina M. Tanala							
ection III: Totals - sum or cost	s in each columb		\$189,126		\$204,125		
			(To	ital)	(Total)		
ection IV: Analysis of new success	or agreement		NEW AGREEN	WENT ANALYSIS			
Total Base Yas:(provious agreement)	\$189,126						
Effective Date (m/d/yyyy)		1/1/2014	1/1/2015				
Pércent Increase		1%	1%	-			
Total cost of increase		\$7,585	\$8,049				
fotal base sulary (successor agreement)	\$206,472	\$214,521				
ection V: Impact of Settleme	ent - average annual in	crease over term of ag	reement				
Percentage impaci (average per year ov	or term of agreement)	1%					
Jollar Impact (average per year over ten	m of agreement)	\$7,817.00	_	Contributions	based on plan cost	s and	
adia a M					apter 78, P.L. 2011		
ection VI							
leakin insurance findicate costs associa	ted on sech line)						
osi of Hesith Plan	·	Base Year \$32,957	rear 1 \$32,957				
imployee Contributions	1	\$6,420	\$9,630	-			
rescription		\$8,923					
Dental			\$8,923	-			
Vision		\$954	\$954				

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, she is subject to punisment.